

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ML</i>	<i>68904</i>	<i>10/15/02</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>10-2-000</i>
FORMALITY REVIEW	<i>LZ</i>	<i>811</i>	<i>11-13-50</i>
RESPONSE FORMALITY REVIEW	<i>WT</i>	<i>571</i>	<i>04/18/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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